

(Rev. 5/05)

**FORM TO BE USED BY A PRISONER IN FILING A COMPLAINT
UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. §1983**

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF DELAWARE**

(1) Raymond L. Bruton, SBI#069025
(Name of Plaintiff) (Inmate Number)

H.R.Y.C.I., P.O. Box 9561, WILM. DE
(Complete Address with zip code)

(2) _____
(Name of Plaintiff) (Inmate Number)

06 - 736

(Case Number)
(to be assigned by U.S. District Court)

(Complete Address with zip code)

(Each named party must be listed, and all names
must be printed or typed. Use additional sheets if needed)

vs.

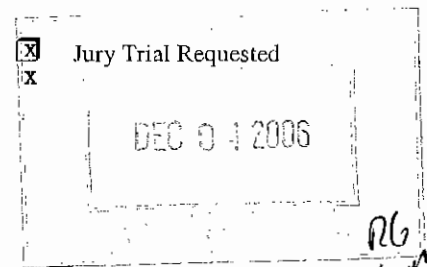
CIVIL COMPLAINT

(1) Russel D. Buskirk

(2) CivGenics

(3) CSM Medical Division
(Names of Defendants)

(Each named party must be listed, and all names
must be printed or typed. Use additional sheets if needed)



1. PREVIOUS LAWSUITS

A. If you have filed any other lawsuits in federal court while a prisoner, please list the caption and case number including year, as well as the name of the judicial officer to whom it was assigned:

Civ. NO 00ev-01032, JJF, 2000, December

Addictional Defendants

Director Jay Sylvester
CiviGenics Key Program (N)
H.R.Y.C.I.
PO Box 9561
Wilmington, DE 19809

Warden Raphael Williams
H.R.Y.C.I., POBox 9561
Wilmington, DE 19809

Mr. Stanely W. Taylor Jr.
Commissioner of Prison
245 Mckee Road
Dover, DE 19904

that DOC controlled the daily exercise which the residents were allow to have; And we had to live with it on the conditions. Never fully understanding whether DOC was at fault for the none committment to exercise or was it the civil Genics Program for their lack of care in providing leadership which would have concern itself with the Key(N) problem of no exercise outside or in the Gym during the period of August 30, 2005, to July 8, 2006.



Raymond L. Bruton
SBI# 069025 Unit 2-Q-21
H.R.Y.C.I., POBox 9561
Wilmington, DE 19809

Date: November 28 , 2006

IV. STATEMENT OF CLAIM

(State as briefly as possible the facts of your case. Describe how each defendant is involved, including dates and places. Do not give any legal arguments or cite any cases or statutes. Attach no more than three extra sheets of paper if necessary.)

1. SEE Attach Statement of Facts:

2. SEE Attached Statement of Facts:

3. SEE Attached Statement of Facts:

V. RELIEF

(State briefly exactly what you want the Court to do for you. Make no legal arguments. Cite no cases or statutes.)

1. Plaintiff respectfully request of the Court to be com-
pensated and request
punitive damages against the defendants for their willful
violation of Plaintiff rights to have exercise and the rig
right to breathe fresh air which denied Petitioners his
14 Amendment and under his Eight Amendment created cruel

Key North Correctional Recovery Program Residents Weekly Schedule

| Day/Time | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|-------------------------|--|---|--|---|---|---|---|
| 0600 | Lights ON | Lights ON | Lights ON | Lights ON | Lights ON | Lights ON | Lights ON |
| 0630 | Breakfast | Breakfast | Breakfast | Breakfast | Breakfast | Breakfast | Breakfast |
| 0700 | Count | Count | Count | Count | Count | Count | Count |
| 0740 | Shower & Shave | Shower & Shave | Shower & Shave | Shower & Shave | Shower & Shave | Shower & Shave | Shower & Shave |
| 0800 | Count | Count | Count | Count | Count | Count | Count |
| 0830 | Education | Education | Education | Education | Education | | |
| 0830 - 0900 | Inspection AM Meeting | Inspection AM Meeting House I - Community Meeting | Inspection AM Meeting | Inspection AM Meeting House II - Community Meeting | Inspection AM Meeting | AM Meeting | AM Meeting |
| 0900-1100 Session I | House I & II Committees Testing for Phase Movement | House II All Phases Peer Awareness House I Commissary | House I All Phases Peer Awareness <i>Peer Awareness</i> House II Commissary | House I & II All Phases | All Phases Recreation Recovery Activities Committees | House I & II Phase I only Seminar | Individual Counseling |
| 1130 | Count | Count | Count | Count | Count | Count | Count |
| 1200 | Lunch | Lunch | Lunch | Lunch | Lunch | Lunch | Lunch |
| 1300-1430 Session II | House I & II All Phases | House II All Phases Self Discovery | House I & II All Phases | House I All Phases Self Discovery | House I & II All Phases Learn to Deal | House I & II Phase I only Intro to 12 Steps | Recovery Activities Journaling Free Time |
| 1500 & 1600 | Count | Count | Count | Count | Count | Count | Count |
| 1615 | Dinner | Dinner | Dinner | Dinner | Dinner | Dinner | Dinner |
| 1700-1730 | Committee Meeting | Individual Counseling | Committee Meeting | Individual Counseling | Committee Meeting | Individual Counseling | Individual Counseling |
| 1730-1830 | Individual Counseling | House I & II AA/NA | House I & II AA/NA | House I & II Phase III - RePac | House II only AA/NA | House I only AA/NA | House I & II AA/NA |
| 1800-1930 | | | | | House I Recreation | House II Recreation | |
| 2000-2030 | PM Meeting | PM Meeting | PM Meeting | PM Meeting | PM Meeting | PM Meeting | PM Meeting |
| 2300 | Lights OFF | Lights OFF | Lights OFF | Lights OFF | Lights OFF | Lights OFF | Lights OFF |

STATE OF DELAWARE
DEPARTMENT OF CORRECTION
HOWARD R. YOUNG CORRECTIONAL INSTITUTION
OFFICE OF THE GRIEVANCE CHAIRPERSON
1301 E. 12TH STREET
WILMINGTON, DE 19801

MEMORANDUM

TO: Inmate Raymond Bruton Dorm I
FROM: Sgt. Moody, Inmate Grievance Chairperson
DATE: 2-27-06
RE: YOUR RECENT GRIEVANCE #06- 23986 - group

This memo is to inform you that the grievance submitted by you dated 2-26-06, regarding outside recreation is not grievable for the following reason(s):

- ☐ The complaint was addressed by the IGC: _____.
- ☐ Security issue (involves the security and/or staffing of the Institution and/or the safety, health, and/or welfare of inmates, staff and the public).
- ☐ Classification issues (security classification, jobs, transfers, programs, housing unit assignment). Classification has its own appeal process. The inmate must write to the Treatment/Classification Unit within seven (7) days after the inmate receives the Classification decision. The letter must state that the inmate is appealing the classification and clearly indicate the reasons the inmate disagrees with the classification decision.
- ☐ Disciplinary issue. Disciplinary actions cannot be grieved but must be APPEALED within 24 hours of the Class I or Class II Hearing Decision. Complete an appeal form and mail it to the facility Hearing Officer within 24 hours of receiving the form. Please note that 24 loss of all privileges cannot be appealed.
- ☐ Parole Board Decision. The inmate must write a letter to the Parole Board within 30 days of the Board's decision. Expressing the desire to appeal the decision and listing the reasons. The Parole Board's address is: Board of Parole, Carvel State Office Building, 820 N. French Street, 5th Floor, Wilmington, DE 19801.
- ☐ Inmates cannot request or demand disciplinary action on staff. If you have a complaint regarding staff write a letter to that person's supervisor. In this case, that is:
- ☒ This is an issue/complaint that has already been grieved by you or another inmate. 06-23791
- ☐ Grievance is unacceptable because it has passed the seven (7) day time frame allotted to file a grievance.
- ☐ The grievance is a photocopy, carbon copy, written in pencil or red ink. Original grievance forms must be written in black or dark blue ink.
- ☐ This complaint is addressed in the Inmate Handbook. Refer to the handbook page _____ for clarification and/or direction.

_____ Action request is inappropriate or not completed. Inmate must make an actual request, such as, request that an investigation be conducted (inmates are not forwarded results of investigations that involve staff conduct).

_____ Documentation must be attached to the grievance when it is resubmitted that supports allegations/complaint, such as commissary receipts, Form 537, etc. The IGC will make copies of items submitted with the grievance and return the originals to the inmate.

_____ This complaint should be addressed by submitting a sick call slip. If you are experiencing any type medical condition, please submit a sick call slip.

_____ Other: Requests are not processed through the grievance procedure.

_____ Other: Please be advised that you have submitted your grievance on the wrong form. Please re-submit using the correct grievance form.

cc: file

II. EXHAUSTION OF ADMINISTRATIVE REMEDIES

In order to proceed in federal court, you must fully exhaust any available administrative remedies as to each ground on which you request action.

- A. Is there a prisoner grievance procedure available at your present institution? ☒ Yes ☐ No
- B. Have you fully exhausted your available administrative remedies regarding each of your present claims? ☒ Yes ☐ No
- C. If your answer to "B" is Yes:
1. What steps did you take? I talk to my Counselors in the Key Program, wrote Grievances to Sgt. Moody,
 2. What was the result? Nothing was done by anyone:
- D. If your answer to "B" is No, explain why not: _____

III. DEFENDANTS (in order listed on the caption)

- (1) Name of first defendant: Russel D. Buskirk
Employed as CSMigenics- DE State Office
Mailing address with zip code: 300 Water Street, Dover DE, 19904
- (2) Name of second defendant: _____
Employed as CSM Medical Division at _____
Mailing address with zip code: H.R.Y.C.I., P.O. Box 9561, Wilm. DE
19809
- (3) Name of third defendant: Warden Rapael Williams
Employed as Warden at H.R.Y.C.I., P.O. Box 95
Mailing address with zip code: 61, Wilmington. DE 19809

(List any additional defendants, their employment, and addresses with zip codes, on extra sheets if necessary)

2. and unusual punishment by not affording Petitioner his
right to breath good clean air and exercise,
3. And finally, defendants denied Plaintiff in the Key Program
North, of life, liberty or property, without due process
of law, and denied Plaintiff within its jurisdiction the
equal protection of the law.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 28 day of November, 2006.

Raymond L. Bruton
(Signature of Plaintiff 1)

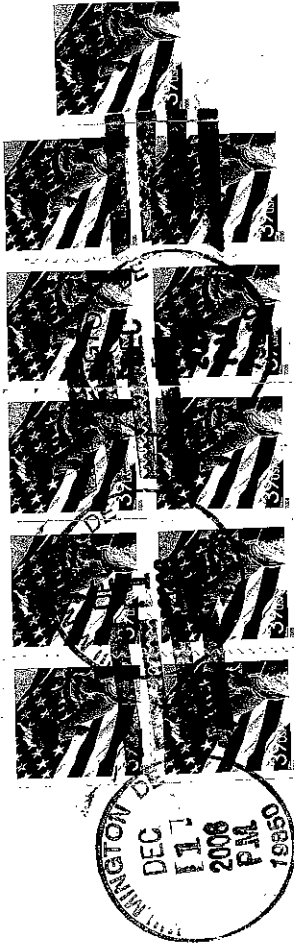
(Signature of Plaintiff 2)

(Signature of Plaintiff 3)

From Raymond L. Beston
SBI # 069025 UNIT 2Q-Pd
H.P. O.I., Po Box 9561
Wilmington, DE 19809

Q21

RETURNED FOR \$ 4.05 POSTAGE



U.S. District Court
Lockbox 18
Boggs Federal Building
844 King Street
Wilmington, DE 19801

U.S. M.S.
X-RAY